IN THE UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF TENNESSEE AT GREENEVILLE, TENNESSEE

TINA NORRIS, MELISSA BLEVINS and *APRIL YARBER, surviving children and next *kin of TERESA NORRIS; and APRIL YARBER* Administrator of the Estate of TERESA *NORRIS, *

Plaintiffs,

vs. * Case No. 2:12-cv-00415

MOUNTAIN STATES HEALTH ALLIANCE, d/b/a THE TRANSPLANT CENTER at JOHNSON CITY MEDICAL CENTER;

JOHNSON CITY MEDICAL CENTER;
BLUE RIDGE MEDICAL MANAGEMENT
CORPORATION, d/b/a BLUE RIDGE
SURGICAL ASSOCIATES; JOSEPH LEE,
M.D.; and JON JONES, M.D.,

Defendants.

FIRST AMENDED COMPLAINT

JURY DEMANDED

Come the Plaintiffs pursuant to Rule 15 of the Federal Rules of Civil Procedure and respectfully amend the Complaint filed in this cause on October 11, 2012 as follows:

- 1. Paragraphs 1-36 of the original Complaint are incorporated herein by reference.
- 2. Page 1 of the "HIPPA Compliant Authorization for Release of Medical Information" attached hereto as part of this First Amended Complaint is substituted for page 1 of the "HIPPA Compliant Authorization for Release of Medical Information" filed on October 11, 2012.

 (Document 1-11 filed 10/11/12 Page 2 of 6 PageID#:64). Page 1 of the HIPPA form filed on

October 11, 2012 was filed in error. Page 1 of the HIPPA form attached as part of this First Amended Complaint was, in fact, the HIPPA Authorization that was mailed with the Notice Letters to the Defendants and other providers on June 13, 2012.

RESPECTFULLY SUBMITTED,

TINA NORRIS, MELISSA BLEVINS and APRIL YARBER, surviving children and next kin of TERESA NORRIS; and APRIL YARBER Administrator of the Estate of Teresa Norris

BY:s/John S. Bingham, Esq., BPR6263

Attorney for Plaintiffs

HAWKINS BINGHAM & MILLER, PC 1397 E. Center Street Kingsport, TN 37664

423-246-9100 telephone 423-246-9282 facsimile

HIPPA COMPLIANT AUTHORIZATION FOR RELEASE OF MEDICAL INFORMATION

Patient: TERESA NORRIS Birth Date: 1/17/50

Social Security No.: 226-80-2348

A. I hereby authorize any of the following listed providers to release information from my medical records to any other medical provider listed below:

Joseph Lee, M.D.; Jon Jones, M.D.; Elvira Loria, M.D.; Mountain States Health Alliance, d/b/a The Transplant Center at JCMC; Mountain States Health Alliance, d/b/a Johnson City Medical Center; Mountain States Health Alliance, d/b/a Smyth County Community Hospital; Blue Ridge Medical Management Corporation, d/b/a Blue Ridge Surgical Associates; Drs. Green, P.C.; Medical Education Assistance Corporation, d/b/a ETSU Physicians & Associates

- B. For the following purpose: To be reviewed by said providers and his/her/their attorneys, agents or representatives.
- C. For treatment dates: 01/01/07 to 11/12/11
- D. Description of Information to be used.

Copies of medical records regarding TERESA NORRIS in the possession of the medical providers listed above in Part A, including but not limited to, all medical records, meaning every page in the records, including but not limited to: office notes, face sheets, history and physical, consultation notes, impatient, outpatient and emergency room treatment, all clinical charts, reports, order sheets, progress notes, nurse's notes, social worker records, clinic records, treatment plans, admission records, discharge summaries, requests for and reports of consultations, documents, correspondence, test results, statements, questionnaires/histories, correspondence, photographs, telephone messages, and records received by other medical providers. All physical, occupational and rehab requests, consultations and progress notes. All autopsy, laboratory, histology, cytology, pathology, immunohistochemistry records and specimens; radiology records and films including CT scan, MRI, MRA, EMG, bone scan, myleogram; nerve condution study, echocardiogram and cardiac catheterization results, videos/CDs/ films/ reels and reports. All pharmacy/prescription records. All billing records including all statements.